

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>OV</i>	<i>132</i>	<i>2/2</i>
FORMALITY REVIEW	<i>Em</i>	<i>927</i>	<i>02/16/01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim		Date			
Final	Original				
1	11	4	4	4	
2	15	7	5	15	
3	02	03	03	04	
4	✓	✓	✓	✓	
5	✓	✓	✓	✓	
6	✓	✓	✓	✓	
7	✓	✓	✓	✓	
8	✓	✓	✓	✓	
9	✓	✓	✓	✓	
10	✓	✓	✓	✓	
11	✓	✓	✓	✓	
12	✓	✓	✓	✓	
13	✓	✓	✓	✓	
14	✓	✓	✓	✓	
15	✓	✓	✓	✓	
16	✓	✓	✓	✓	
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18	✓	✓	✓	✓	
19	✓	✓	✓	✓	
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Claim		Date			
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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02/16/01